

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

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(FOR USE WITH FORM PTO-875)

19752380
CLAIM

AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
IND	DEP	IND	DEP	IND	DEP	IND	DEP	IND	DEP	IND	DEP
1	1					1					
2	1					2					
3		1				3					
4		2				4					
5		2				5					
6		2				6					
7		2				7					
8		1				8					
9		1				9					
10		1				10					
11		1				11					
12	1					12					
13		1				13					
14		2				14					
15			1			15					
16			1			16					
17			1			17					
18			1			18					
19			1			19					
20			1			20					
21			1			21					
22			1			22					
23			1			23					
24			1			24					
25			1			25					
26			1			26					
27			1			27					
28			1			28					
29			1			29					
30			1			30					
31			1			31					
32			1			32					
33			1			33					
34						34					
35						35					
36						36					
37						37					
38						38					
39						39					
40						40					
41						41					
42						42					
43						43					
44						44					
45						45					
46						46					
47						47					
48						48					
49						49					
50						50					
TOTAL IND.	3	1				TOTAL IND.					
TOTAL DEP.	16	18				TOTAL DEP.					
TOTAL CLAIMS	19	19				TOTAL CLAIMS					